

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213521264			
<div style="display: flex; justify-content: space-between;"> <div> 1.) CORPORATION NAME: PRS, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: WENDY GRADISON 1761 OLD MEADOW RD STE 100 MCLEAN, VA </div> <div> DUE DATE: 6/30/2013 SCC ID NO: 01267657 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE: FAIRFAX COUNTY					
4.) STATE OR COUNTRY OF INCORPORATION: VA					
6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;"> ADDRESS: 1761 OLD MEADOW ROAD STE 100 CITY/ST/ZIP: MCLEAN, VA 22102 </div>					
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: WENDY GRADISON TITLE: P/CEO ADDRESS: 1408 WHITLEY DR CITY/ST/ZIP/CO: VIENNA, VA 22182 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: WENDY GRADISON TITLE: P/CEO ADDRESS: 1408 WHITLEY DR CITY/ST/ZIP/CO: VIENNA, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Stephen Perry DIRECTOR 2901 Willston Place, Apt. 201 Falls Church, VA 22044	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Tom Polseno DIRECTOR 2506 20th Road North, Apt. 501 Arlington, VA 22201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sandy Sieber DIRECTOR P.O. Box 7136 McLean, VA 22106	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Mary Suppley-Foxworth DIRECTOR 2114 Owls Cove Lane Reston, VA 20191	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ginger Smith DIRECTOR 8989 Brook Road McLean, VA 22102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ WENDY GRADISON	WENDY GRADISON, P/CEO	5/2/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			